

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: _____		2 Serial/Patent # <u>10/522116</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
✓	Filing			\$ <u>5000</u>							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ <u>5000</u>							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
✓	Overpayment	Credit Deposit A/C #:									
	Duplicate Payment	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>5</td><td>0</td><td>--</td><td>2</td><td>1</td><td>8</td><td>3</td></tr></table>			5	0	--	2	1	8	3
5	0	--	2	1	8	3					
	No Fee Due (Explanation):										
<i>Rule change - 08 Dec 2004 -</i> <i>Improper multiple claims -</i>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME:		TITLE: <u>Supervisor</u>									
SIGNATURE: <u>Terry M. Johnson</u>		PHONE: <u>703-308-9140</u>									
OFFICE: <u>DDO/ED</u>		<u>X221</u>									
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____		DATE: _____									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: